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APPLICANTS

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** CONTINUING DATA none pmc

** FOREIGN APPLICATIONS none pmc

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/14/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 10	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <u>pmc</u> Initials				

ADDRESS

30206
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TITLE

Diagnostic method for detection of multiple defects in a Level Sensitive Scan Design (LSSD)

FILING FEE RECEIVED 978	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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